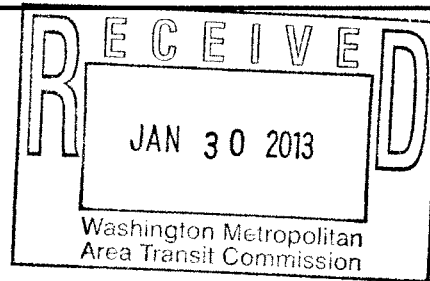


Washington Metropolitan Area Transit Commission

2013 Carrier Annual Report Form

Read the accompanying instructions carefully before completing this form.



1. CARRIER INFORMATION:

1340	Gary Alan Baker, t/a Landmark Limousine & Sedan Service			
*WMATC No. *Name of Carrier (as shown on certificate of authority)				
11707 Talley Court		Oakton	VA	22124-1251
*Street Address of Principal Place of Business	Apt./Suite	City	State	Zip
P.O. Box 100026		Arlington	VA	22210-3026
Mailing Address (if different from street address)	Apt./Suite	City	State	Zip
(703) 716-7660		(703) 716-0631	Gbaker4325@aol.com	
*Telephone	Other Telephone	Fax	E-mail	

2. OTHER PASSENGER CARRIER AUTHORITY (if applicable, list carrier/permit number):

USDOT No.	DCTC No.	Virginia DMV passenger carrier No.	Maryland PSC No.
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3. CARRIER CONTACT PERSON (at mailing address to whom we should direct inquiries):

Mr. Gary Alan Baker	Sole Proprietor		
*Name	*Title		
(703) 716-7660		(703) 716-0631	Gbaker4325@aol.com
*Telephone	Other Telephone	Fax	E-mail

4. REGISTERED AGENT INSIDE THE METROPOLITAN DISTRICT FOR SERVICE OF PROCESS

*Complete section 4 only if the principal place of business in section 1 is outside the Metropolitan District. The Metropolitan District includes the District of Columbia, Prince George's Co., Montgomery Co., Alexandria, Arlington, Fairfax, Falls Church, and Dulles Airport. For a full description, see www.wmatc.gov.

Janice N. Baker	(703) 638-9867	janiceb20120@gmail.com		
Name of Registered Agent for Service of Process	Telephone	E-mail		
6001 Netherton Street		Centreville	VA	20120
Agent Address (must be inside Metropolitan District)	Apt./Suite	City	State	Zip

5. ***CHANGES:** Describe any merger, consolidation or other change in management, ownership, control, or form of organization that occurred after the previous year's annual report was filed, or if not applicable, after the carrier's certificate of authority was issued. If no changes are entered below, the carrier certifies that no such changes have occurred.

6. ***LIST OF REVENUE VEHICLES USED IN WMATC OPERATIONS:** (1) list your vehicles below or (2) attach a complete vehicle list to both pages of this form. Include all required information.

Fleet No. If applicable	*Model Year	*Make	*Vehicle VIN (17 dgts)	*License Plate Number	*State Registered	*Seating Capacity	Wheelchair Lift or Ramp Yes/No
		See Attached List					

7. ***CERTIFICATION:**

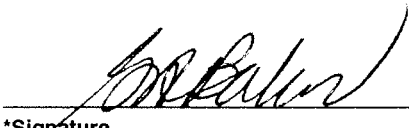
I certify that this report, including any attachments, was prepared by me or under my supervision, that I have examined it, and that the information contained in it is true, correct, and complete as of this date.

GARY A. BAKER

*Name (type or print)

Owner

*Title (not required for sole proprietors)



*Signature

1/28/13

*Date

2012 Vehicle List

Year	Make	VIN	Plate	Expiration	State	Capacity
✓ 2013	GMC Van	1GJJE71FG1D1130276	H510502	1/31/2014	VA	12
✓ 2010	Cadillac Escalade	1GYUKGEF8AR277827	121HAA	9/30/2012	VA	6
✓ 2008	Cadillac DTS	1GEEK90YX8U60014	119HAA	1/31/2013	VA	4
✓ 2011	Cadillac DTS	1G6KHE63BU135340	250HAB	7/31/2012	VA	4
✓ 2011	Cadillac DTS	1G6KHE69BU113407	120HAA	3/31/2014	VA	4
✓ 2012	Lincoln Navigator	5LMJJ3J52CEL04573	419HAB	12/31/2014	VA	6
✓ 2010	Mercedes S550	WDDNG8G83AA329039	981HAA	1/31/2014	VA	4
✓ 2011	Lincoln Navigator	5LMJJ3J57BEJ06943	214HAD	7/31/2013	VA	6
✓ 2010	Cadillac DTS	1G6KD5EY6AU112890	275HAC	3/31/2014	VA	4
✓ 2013	Hyundai Equus	KMHGH4JHXDU059747	H500924	6/30/2014	VA	4
2012	Hyundai Equus	KMHGH4JH5CU056365	252HAB	5/31/2014	VA	4